

IRA Request for Transfer/Direct Rollover Form



Complete this form to: (a) transfer funds from a Traditional, Roth, SEP, or SIMPLE IRA currently held with another financial institution; or, (b) request a Direct Rollover from your employer's qualified retirement, 403(b), or 457 plan to a new or existing IRA.

Notes: Rollovers of after-tax contributions or Roth 403(b) contributions to 403(b) accounts will not be accepted.

Only one rollover to any IRA is permitted in any 12-month period per IRS rules. Questions should be directed to your tax advisor.

Federated Hermes will send a letter of acceptance to the financial institution, employer, or current trustee of your retirement plan to complete the transfer or direct rollover.

Please complete all applicable fields using blue or black ink, and print clearly in capital letters.

1. Investor Information

Full Legal Name (First, MI, Last, Suffix)	Social Security or Tax ID Number	Date of Birth
Daytime Phone Number	Evening Phone Number	Email Address

2. Information About the IRA Being Transferred

Note: Attach a statement for the IRA being transferred.

Name on Account	Full Account Number		
Firm Currently Holding the Account			
Firm Street Address	City	State	Zip Code
Name of Contact	Contact Phone Number		

Check only one for Section A and Section B

A. Type of IRA

- Traditional IRA
- Rollover IRA
- Roth Contribution IRA
- Roth Conversion IRA
- SEP IRA
- SIMPLE IRA
- Qualified Plan

B. Investment Type

- Direct Rollover of assets
- Transfer of assets from another financial institution

SIMPLE IRA Start Date

3. Transfer/Rollover Instructions

Check One:

- This is a new account; a completed IRA New Account Application is attached. Allocate my assets as listed below.
- The assets of this transfer will purchase shares into my existing IRA as listed below.

3. Transfer/Rollover Instructions (continued)

Transfer/Rollover Allocation

Please indicate the fund name and share class or fund number, and full account number (if known), into which assets will be transferred. Class A Shares will be purchased if no share class or fund number is indicated.

Fund Name and Share Class	Fund Number	Full Account Number	Amount (\$ or %)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> \$ <input type="checkbox"/> % <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> \$ <input type="checkbox"/> % <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> \$ <input type="checkbox"/> % <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> \$ <input type="checkbox"/> % <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> \$ <input type="checkbox"/> % <input type="text"/>

4. Transfer/Rollover Instructions to the Financial Institution, Trustee, or Employer Currently Holding Your IRA

Check One:

- Transfer entire balance
- Transfer only \$
- Transfer In Kind (Change the Custodian)
- Rollover entire balance
- Rollover only \$

If Transfer, Check One:

- Liquidate immediately
- Liquidate at maturity Date

Note: If you are transferring a Certificate of Deposit (CD), mail this form at least 14 days, but not more than 21 days, before the maturity date.

5. Withholding Instructions for Roth Conversion IRA

When converting all or a portion of your IRA to a Roth Conversion IRA, the conversion amount is a taxable distribution. IRS regulations require the financial institution currently holding your IRA to withhold federal income tax from the amount you convert unless you do not want withholding to occur. The minimum withholding rate is 10%. Indicate your withholding election below:

- Do Not Withhold
- Withhold 10%
- Withhold %

6. Investor Signature Authorization

To the financial institution, trustee, or employer currently holding my IRA:

I have appointed UMB Bank n.a. as the Custodian of my IRA and authorize you to transfer my IRA or retirement plan to UMB Bank n.a. Please send any documents or records needed by the new Custodian to complete the transfer/rollover.

Investor Signature Date

7. Custodian Acceptance — To Be Completed By UMB Bank n.a.

UMB Bank n.a. accepts appointment as Custodian and the transfer/direct rollover described in this form. Please transfer all or part of the designated account(s) as instructed. Make check payable to **The Federated Funds** and mail to one of the addresses below. Third party checks are not acceptable.

Custodian Signature Date

Title

8. Mailing Instructions

Please mail this form and any additional documents to **The Federated Funds:**

- Regular Mail:**
P.O. Box 219318
Kansas City, MO 64121-9318
- Overnight Delivery:**
430 W 7th Street, Suite 219318
Kansas City, MO 64105-1407

Client Services 1-800-341-7400, Option 4

For more information, visit our website at FederatedInvestors.com

Federated Shareholder Services Company